Women & Health Reform

September 1st, 2011 Save The Date!

2nd Annual Women and Health Reform Community Dialogue

THE FUTURE IS TODAY:

IMPLEMENTING HEALTH CARE REFORM
THAT WORKS FOR WOMEN

THE CALIFORNIA ENDOWMENT— YOSEMITE ROOM BREAKFAST & REGISTRATION - 7:30AM
PROGRAM - 8:30AM-12:30PM

FOR MORE INFORMATION PLEASE CALL: 213-284-3200 EXT. 3730 OR EMAIL: HEALTH.REFORM@PP-LA.ORG

THE LOS ANGELES COALITION FOR WOMEN AND HEALTH REFORM WORKS TO ENSURE THAT WOMEN'S HEALTH IS RECOGNIZED, PRIORITIZED AND PROTECTED AS OUR REGION BEGINS TO IMPLEMENT HEALTH CARE REFORM.

Founding Coalition Partners: Black Women for Wellness, California Black Women's Health Project, California Family Health Council, Inc., California Latinas for Reproductive Justice, Los Angeles County Department of Public Health Office of Women's Health and Health Assessment and Epidemiology, National Health Law Program, Planned Parenthood Los Angeles and The Saban Free Clinic

Los Angeles County Coalition for Women and Health Reform

2nd Annual Women and Health Reform Community Dialogue Sept 1, 2011 California Endowment

The Future is Today: Implementing Health Care Reform That Works for Women

My notes from the presentations:

Susan Berke Fogel, J.D. Director, Reproductive Health, National Health Law Program spoke on the Affordable Care Act and what is presently happening to implement

- Low income women will benefit 7 million uninsured/ 4.7 million eligible for Exchange
- Those poor, pregnant, ageing, disabled, lawfully present for 5 years into Medicaid
- Those 133% or less of the Federal Poverty Level are put into the Exchange (a marketplace to buy insurance)
- Problem: navigation of the system is difficult and limits access to care
- Problem: some very poor or not citizens for 5 years might fall through the cracks
- What is covered? Marernity, Emergency, Prescriptions, Ambulatory issues, Hospital, Mental health, Rehab, Chronic illness, Oral/vision care, PREVENTION SERVICES
- Delivery system is hard to navigate AND now is the time to initiate and advocate for services to women.
- California Exchange Board is 5 Members Robert Ross from CA Endowment is one
- Medical uses both state and federal \$\$\$\$, the Exchange is only Federal \$\$\$ and no abortion services with this health service
- Understanding the ACA is beginning NOW with Healthy Way LA
- Healthcare.gov Healthcare.ca.gov and healthconsumer.org are sites for more information

Mayra Alvarez, MHA, Director of Public Health Policy, Office of Health Reform, US Department of Health and Human Services spoke on protecting women's health through the Affordable Care Act

- Implementation: cultural competent issues important for inclusion
- Closing the donut hole with insurance for meds and preexisting conditions issues
- Health coverage until 26 years and older Americans spend all \$\$\$ in last two years of life
- Cover prevention services: mammograms, colonoscopies/blood work/STD screenings
- Diabetes, Annual Well Woman visits, HPV DNA tests, STD screenings, HIV screenings, breast feeding support, DV screenings, access to sterilization and pregnancy prevention.
- Businesses with under 25 can get 50% support for insurance coverage
- Can keep insurance even with changing locations
- NEED TO INPUT IDEAS NOW TO BE INCLUDED IN THE RULES regulations.gov
- Prevention Public Health Fund: \$500 million in 2010 and \$750 million in 2011 for evidenced based strategies in prevention programs

Crystal Crawford, J.D. CEO California Black Women's Health Project

- Coalitions are important to get everyone covered and all issues included in law Michael Katz, MD, Director Los Angeles County Department of Health Services
 - ½ uninsured women still not covered by this ACA
 - Important to improve patient experience at MD, focusing on primary preventive care and scheduling care services for prompt, convenient times.

Terri Thorfinnson: California Health and Human Services Agency Office of Women's Health

- Need to look at healthcare form a business model
- Medical will have a two tier program with benefits tied to preventive strategies
- Health plans include DV referrals, well visits, pilot projects with evidence

Bills that need to be reviewed and followed:

- AB 52 Rate regulation to control cost of insurance
- AB 1296 single enrollment
- AB 922 dealing with oversight of insurance issues
- AB 222/210 maternity coverage

Important program in affect NOW **Bridge to Healthcare** Bridge to Medicaid and offers enrollment into the program. The federal government pays 50 cents/\$1 that can be given to clinics to offset costs Have enrolled 17,000 in the first 6 months thus far.

The program was very informative in that we are in the planning and early implementation stage NOW and any of the health issues relating to women's health can be sent to healthcare.gov to be considered for inclusion.

Charlotte Lesser, Health Committee member 9/7/2011